

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF OREGON

Case number (if known)

Chapter

11☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/24

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **Metatron Health LLC**

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

DBA Portland Regenerative Medicine

3. Debtor's federal Employer Identification Number (EIN) **84-3537706**

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

**6464 SW Borland Road
Tualatin, OR 97062**

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Clackamas

County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) **<https://lumeramedical.com/>**

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: _____

Debtor **Metatron Health LLC**
Name

Case number (if known)

7. Describe debtor's business A. *Check one:*

- ☒ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☐ None of the above

B. *Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

6213**8. Under which chapter of the Bankruptcy Code is the debtor filing?** *Check one:*

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. *Check all that apply:*

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District _____

When _____

Case number _____

District _____

When _____

Case number _____

Debtor **Metatron Health LLC**
Name

Case number (if known)

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor

Relationship

District

When

Case number, if known

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

- ☐ It needs to be physically secured or protected from the weather.

- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

- ☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No☐ Yes.

Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000☒ \$1,000,001 - \$10 million☐ \$500,000,001 - \$1 billion

Debtor

Metatron Health LLC

Name

Case number (if known)

☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Metatron Health LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **February 20, 2025**
MM / DD / YYYY**X /s/ Roberta Huang**

Signature of authorized representative of debtor

Roberta Huang

Printed name

Title **Member****18. Signature of attorney****X /s/ Nicholas J. Henderson OR:**

Signature of attorney for debtor

Date **February 20, 2025**

MM / DD / YYYY

Nicholas J. Henderson OR: 074027

Printed name

Elevate Law Group

Firm name

**6000 SW Meadows Road
Suite 450
Lake Oswego, OR 97035**

Number, Street, City, State & ZIP Code

Contact phone **(503) 417-0500**

Email address

OR: 074027 OR

Bar number and State

Fill in this information to identify the case:

Debtor name **Metatron Health LLC**
 United States Bankruptcy Court for the: **DISTRICT OF OREGON**
 Case number (if known): _____

☐ Check if this is an
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Official Form 204**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
AbbVie Inc. 62671 Collections Center Drive Chicago, IL 60693-0626		All Assets		\$386,642.13	Unknown	Unknown
American Express Bank PO Box 650448 Dallas, TX 75265		Business Credit Card				\$176,833.17
Andrea Day c/o Markowitz Herbold Attn: Adele Ridenour 1455 SW Broadway, Suite 1900 Portland, OR 97201	Adele Ridenour adeleridenour@markowitzherbold.com 503-295-3085	Wages Claimed	Disputed			\$49,999.99
Bittner Hahs Postma Swan 4949 Meadows Road, Suite 260 Lake Oswego, OR 97035	Eric Postma epostma@bittner-hahs.com 503-228-5626	Legal Services				\$140,000.00
BR USA LLC c/o Davis & Jones LLC Jeremiah Arrowood 3120 Sabre Dr STE 280 Southlake, TX 76092-2102	Jeremiah Arrowood jarrowood@dvsjones.com 817-337-0123	Loan				\$13,310.72
Capital One PO Box 60599 City of Industry, CA 91716-0599		Credit Card	Disputed			\$16,912.10

Debtor **Metatron Health LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Cordell Neher PLLC 175 Penny Rd #1 Wenatchee, WA 98801	Kyle Meissner kylem@cnc CPA.com (509) 663-1661	Services Rendered				\$98,000.00
EverBank 1750 Lincoln Street Sept. 1608 Denver, CO 80274		Sciton JouleX Laser System		\$210,000.00	\$175,000.00	\$35,000.00
First Citizens Bank & Trust Co. Central Bank Operations PO Box 27131 Raleigh, NC 27611-7131		Business Credit Card				\$89,960.04
First Citizens Bank & Trust Co. Central Bank Operations PO Box 27131 Raleigh, NC 27611-7131		1064 nm Module: Nd: YAG Laser and Accessories		\$133,196.00	\$50,000.00	\$83,196.00
First Citizens Bank & Trust Co. Central Bank Operations PO Box 27131 Raleigh, NC 27611-7131		Joule X Multi-Laser Wavelength Platform 220 VAC, stand, handpieces, and accessories		\$215,425.00	\$100,000.00	\$115,425.00
Great America Financial Services PO Box 660831 Dallas, TX 75266-0831		BTL Emsella with control unit and chair applicator AND ALL PRODUCTS, PROCEEDS AND ATTACHMENTS		\$105,000.00	\$50,000.00	\$55,000.00
Lumera Regenerative Group Inc c/o Robert Miracle 2238 SE 33rd Portland, OR 97209		Loan				\$100,000.00
Merz Aesthetics 6501 Six Fork Road Raleigh, NC 27615	DawnMarie Doerr dawnmarie@agaltd.com 833-880-0694	Purchases Made				\$56,121.00

Debtor **Metatron Health LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Merz Aesthetics 6501 Six Fork Road Raleigh, NC 27615	DawnMarie Doerr dawnmarie@agaltd.com 833-880-0694	Purchases Made				\$54,212.00
Navitas Credit Corp. 201 Executive Center Dr., Suite 100 Columbia, SC 29210	Shymeshia Smith ssmith@navitascredit.com 888-978-6353 x503	BTL EMSculpt Treatment System and Accessories		\$55,063.50	\$50,000.00	\$5,063.50
Nikolay Antonov, Anna Antonov, and McNaire Underwriters LLC 15601 SE Mill Plain Blvd. Vancouver, WA 98648	Taylor Duty taylor@jjh-law.com 503-552-1467	Business Debt				\$980,000.00
OnePlace Capital 1920 Center Creek Drive Fairmont, MN 56031	Jessica Lint jlint@oneplacecapital.com 712-336-7672	Equipment Loan: BTL Industries, Inc. Emtone Laser		\$71,661.10	\$49,000.00	\$22,661.10
Rachel Kuhl 3049 Southwest 36th Ave. Portland, OR 97221		Wages Claimed	Disputed			\$4,965.60
Site Centers Corp. 3300 Enterprise Pkwy Beachwood, OH 44122		Past Due Rent				\$101,789.09